

# CLAIMS ONLY

Application Number

10/817,114

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2	1						52					
3		2					53					
4		1					54					
5							55					
6		5					56					
7		5					57					
8		5					58					
9		5					59					
10		5					60					
11							61					
12	1						62					
13	1						63					
14		2					64					
15		1					65					
16		1					66					
17							67					
18		2					68					
19		2					69					
20		2					70					
21		2					71					
22							72					
23							73					
24							74					
25		1					75					
26		1					76					
27	1						77					
28	1						78					
29	1						79					
30	1						80					
31		10					81					
32		14					82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	8						Total Indep					
Total Depend	66						Total Depend					
Total Claims	74						Total Claims					